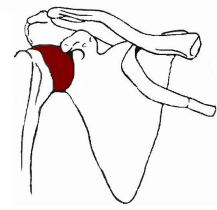
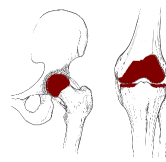


DR SA PEACH

MBChB (PRET) M MED ORT (PRET) GKS (SA) ORT
PR 2807122



ORTOPEDIESE CHIRURG / ORTHOPAEDIC SURGEON

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FAX: (012) 335 1856 / 9591 (Eugene Marais)
TEL: (012) 348 4601 (Faerie Glen)
Email: andrepeach@lantic.net

PATIENT DISCHARGE FORM – REVERSE PROSTHESIS

PATIENT: _____

Treatment Plan Post-Operative:

- * Follow up 2 weeks for wound inspection and removal of stitches if any.
- * First 6 weeks in sling with passive movement. Active rehabilitation ONLY after 6 weeks.

Post-operative – Physiotherapy for \pm 12 weeks. Phone **Linda Peach Physiotherapists** to book an appointment 1 week after discharge. When consulting another physiotherapist, the above-mentioned physiotherapists can be contacted for the treatment protocol.

Wounds: Follow up appointment \pm 2 - 3 weeks post operative. Shower only. If no stitches, leave wounds closed 10 – 14 days. Remove dressing if wound is dry, leave open. If any wound discharge contact the Rooms.

Date discharged: _____ Physician satisfied: Yes No Did not see physician

PROGNOSIS:

- i Specific prosthesis for shoulder without functional rotator cuff and or joint degeneration.
- ii If prosthesis fails shoulder will be left with minimum function.
- iii Shoulder can become stiff – physiotherapy & regular prescribed exercising is VERY important. (See patient notes)
- iv Prosthesis might wear out, loosen or dislocate.
- v Can expect good elevation of shoulder but rotation will be weak.
- vi Prosthesis is primarily for pain relief, function won't be normal.

FOLLOW UP APPOINTMENT: PLEASE PHONE IN TIME (012) 335 9514, TO MAKE AN APPOINTMENT
 2 WEEKS 3 WEEKS 4 WEEKS 6 WEEKS

PRESCRIBED MEDICATION

MEDICATION	DOSAGE	FREQUENCY	QUANTITY

NB!! IF you run out of MEDICATION, PLEASE CALL THE Rooms IN WORKING HOURS FOR A REPEAT PRESCRIPTION

NOTE: _____

DR. SA PEACH

PATIENT

DATE